

Instructions for Using the Electronic Application Forms

In order to complete the electronic application forms, it is recommended that you use MS Word 2002 software or a later release.

Important – Special Instructions for Completing the Electronic Application Forms

There are a number of preliminary steps that must be taken prior to opening and completing electronic application forms. These steps are necessary because the forms include macros and other hidden data that are needed to accurately interface with the Council's grants management software. Following the steps below will alleviate potential user problems with the forms.

Macro Security Level

The macro security level on Microsoft Word for each computer accessing the forms must be set to "Low" in order for the macros in the application forms to work properly. Complete these initial steps before opening any forms.

1. Open Microsoft Word.
2. Select "Tools," "Macro," and "Security."
3. Select the "Security Level" tab.
4. Set security level "Low" and select "OK."

Opening Forms

All forms must be saved to a hard drive or network drive before opening for use. Do not attempt to complete forms directly from an e-mail attachment or a floppy or CD drive as memory and macro problems may result.

Using Electronic Application Forms in Microsoft Word

To navigate and enter data into the application forms, the most common methods are listed below:

- Using the "Tab" key will bring you to the next field. To maneuver from one field to the next use the "Tab" key or use your mouse to select the field you want to enter data into.
- The Scroll bar allows the user to scroll up and down the screen. By scrolling, fields for entering information can then be selected with your mouse.
- Pressing "Shift + "Tab" keys will return the user to the prior field. This is useful for moving back to previous sections, and for moving from the beginning of the document to the end of the document.

Some Information Can't be Changed in Certain Fields

The application forms are created with macros that allow information to be imported into the Council's data management software. The forms allow access to required data entry fields only. Certain system fields are protected in order to avoid data corruption.

Tips & Tricks

Question: When using the Application Forms, how can I increase the font size?

Answer: All Microsoft Word documents can be viewed larger by selecting View > Zoom... from the menu bar and selecting the zoom level desired, from 10% to 500% of normal. Users can also select the desired zoom level from the zoom dropdown list on the Standard toolbar.

Question: When using the Application Forms, how can I remove the shaded background?

Answer: To remove shading from form fields, you need to use the Forms toolbar. If it isn't visible, you can select View > Toolbars > Forms. Click on the Form Field Shading button to turn the shading on or off.

Instructions for Completing Individual Application Forms

Instructions for Project Data Sheet

If the form is closed without all the required fields completed an error warning will alert you that certain fields need to be completed. The form can be saved and closed and re-opened at a later period to complete the required information.

1. Applicant Information

- Project Number – Leave blank (Assigned by Council)
- Application Number – Leave blank (Assigned by Council)
- Project Name – Provide a short descriptive name for the proposed project (55 character limit)
- Organization Name – Applicant's legal name
- Organization Website – If applicable, provide the applicant's website address
- Organization Address – Street and floor or suite number
- Organization City/State – City and State
- Organization Zip Code – five or nine digit zip code
- Taxpayer ID Number – Provide taxpayer identification number (TIN)
- Project Period – Month/Day/Year. Use numbers. (i.e., XX/XX/XXXX)
- Council Member – Leave blank (Assigned by Council)
- Council Staff – Leave blank (Assigned by Council)

2. Project Information

- Type of Applicant – Select the type of applicant from the pull down menu (i.e., Non-profit, School District, County, etc.) Select only one. *Partnerships/collaborations must choose one organization as the primary applicant.*
- Type of Project – Leave blank (Assigned by Council)

3. Project Funding – The “Total Project Costs” must equal the total of “Council Funds” plus “Applicant Matching Funds.” The federal government is requiring matching funds and all grants awarded by the State Council on Developmental Disabilities. A match of 25% is required for Non-Poverty areas and a 10% match is required for services that will be provided in poverty areas. The match may be in-kind funding.

- Grant Type – Select Poverty or Non-Poverty from the pull down menu. The U.S. Census Bureau provides information on the percent of persons in poverty by state and county. Go to www.census.gov/. In the “People” section, click on “Poverty”. Click on “Small Area Income and Poverty Estimates” to access the state and county data.

4. Contact Information – List the appropriate individuals with whom the Council will communicate for the indicated purposes. Use the check box to auto-fill repetitive information for a contact. The auto-fill information can be over written if necessary (i.e. email addresses).

5. Signatory Authority – Identify the organization Director (CEO or equivalent) who can legally enter into a contractual agreement on behalf of the applicant.

Instructions for Project Outline

If the form is closed without all the required fields completed an error warning will alert you that certain fields need to be completed. The form can be saved and closed and re-opened at a later period to complete the required information.

Applicants will provide the narrative description of their proposed projects on the Project Outline form. Respond to all the components as indicated. Do not exceed the character limits given for each section. The macros in the forms prevent some Word tools from functioning, such as spell checks and underlining. Applicants may want to complete the narrative in a separate document, then copy and paste the final version into the Project Outline form.

1. General Information

- Project Number – Leave blank (Assigned by Council)

2. Questions**1. Abstract**

- Provide a one paragraph abstract that clearly states the project goal, the major activities of the project and the impact it will have on people with developmental disabilities.

2. Qualifications

- Describe your organization's qualifications to implement the proposed project, including your experience working with people with developmental disabilities.
- Identify any organizations that will be collaborating on the project, and provide a brief description of their role.

3. Methodology

- Provide a detailed narrative about the project, including information on the methodology to be used and an overview of project activities.
- Explain how the proposed project is consistent with the Council's mission.
- State who the target population is and why it is being targeted.
- Specify if the project targets individuals in a federally identified poverty area(s).
- Describe the role of people with developmental disabilities in the project.
- Provide a brief description of project functions for each staff and any subcontractors identified for the project.

4. Accomplishments

- Describe the major expected accomplishments of the project, and how successful completion of the project will impact people with developmental disabilities.
- Describe how activities will continue after the project is completed.

Instructions for Project Work Plan

If the form is closed without all the required fields completed an error warning will alert you that certain fields need to be completed. The form can be saved and closed and re-opened at a later period to complete the required information.

Applicants must review the *Federal Areas of Emphasis and Performance Measures for Developmental Disabilities Councils* and include as many Performance Measures in their application as relate to the proposed project. The Council recognizes that some performance measures cannot be obtained until after the project period has ended. It is the intent of the Council to conduct follow-up activities as appropriate in an effort to identify these post-project performance measures.

1. Project Information

- Project Number – Leave blank (Assigned by Council)
- Project Name – Must be identical to the project name on the Project Data Sheet and Project Outline, not exceed the 55 character limit.

2. Project Details

- Goal of the Project – The impact that the proposed project will have on people with developmental disabilities. (200 character limit)
- Federal Area of Emphasis – Select one from the pull down menu.
- Collaborators – Select any DD Network partners of the Developmental Disabilities Council with a checkmark next to the organization. List up to seven other collaborators in “Other”, and separate them with commas.
- Primary Type of Project Activity - Select the one activity that best describes the project from the pull down menu. If ‘Other’ is selected, use the Tab key to move into the box below, and indicate only one activity.

3. Periodic Objectives

Enter information for one objective at a time. To add additional objectives, double click on the “Add next objective” button.

- Objective Number – Automatically assigned by the form.
- Objective – Describe the objective in outcome terms.
- Activities Letter – Automatically assigned by the form.
- Activities (Describe all activities for this objective) – For each objective, provide a short list of all the activities to be undertaken to achieve the objective. To add additional activities, double click on the “Add next activity” button.
- Timelines – Provide realistic start and end dates for completing the objective.
- Project Staff – List the primary personnel who will carry out the activities.
- Performance Measures for this Objective – Review the *Federal Areas of Emphasis and Performance Measures for Developmental Disabilities Councils*. Indicate all performance measures applicable to each objective and its related activities. Performance Measures do not have to come exclusively from one Federal Area of

Emphasis. Use the pull down menus to select the prefix (Area of Emphasis) and measure number; then hit the Tab key. The form will automatically fill in the performance measure description and will move the cursor into the applicable field(s) for expected numbers. The form will prevent data entry into non-applicable fields by completely shading those fields.

Note: Applicants can include as many Performance Measure by Objective as needed, but should not include more than one of the same Performance Measures no matter how many Activities are included. For example: QA01 can be included in Objective 1, in any Activity, but not be repeated again in this Objective. QA01 can be repeated in subsequent Objectives.

- Expected Number Individuals with DD (Developmental Disabilities) – Estimate the number of people with disabilities who will benefit under the assigned performance measure.
- Expected Number Family Members – Estimate the number of family members of people with disabilities who will benefit under assigned performance measure.
- Expected Number Other – All other people who don't fit into the two preceding categories and all measures such as programs, dollars, homes, etc. that are not people measures.

To add additional performance measures, double click on the “Add Next Performance Measure” button.

To delete a performance measure, double click on the button in the “Del” column.

Instructions for Project Budget Plan

Develop a line item budget for the project. For each itemized category, specify the total project costs, description of expense, and the expense charged to Council funds. A line item expense under a category must include a description of the line item expense. Grant recipients are not required to provide a non-federal match, but they are encouraged to do so. If your organization is providing a match, identify the expenses under the Matching Funds column and identify the source of those funds.

1. Project Information

- Project Number – Leave blank (Assigned by Council)
- Project Name – Must be identical to the project name on the Project Data Sheet and Project Outline and not exceed the 55 character limit.

2. Budget Summary Section

- Do not attempt to fill in this section. The form will automatically fill in this section as the itemized sections are completed.

3. Budget Itemization Section

- The form will automatically calculate the totals at the end of each itemized category of this section. Itemize costs for the project under the following categories:

3a. Personnel with Fringe Benefits - Indicate the applicant's fringe benefit rate. Identify each position by title and name. Under "Rate," include the hourly rate. Under "Time on Project," specify the number of hours dedicated for this project. After completing the list of positions, multiply the subtotal of personnel costs by the organization's standard percentage for fringe benefit costs, and enter the amounts in the appropriate lines on the "Fringe Benefits" row. The form will automatically calculate the percentage in the field above the category.

3b. Personnel without Fringe Benefits - Provide the same information as above for personnel who do not receive fringe benefits.

3c. Consultation/Subcontracted Services - Describe the cost under "Nature of Expense." Examples include Sign Language Interpreter and subcontractor positions. Under "Rate," include the hourly rate.

3d. Travel - Transportation costs for personnel working on the project. Use the current maximum reimbursable rate allowed by the Internal Revenue Service for private auto mileage per mile. This allowance covers gas, tolls, and parking fees. If the applicant organization's current reimbursement rate is lower, the lower rate must be used.

3e. Supplies/Publications - List all supplies and publications necessary to support the project.

3f. Space Occupancy - Identify the type of space being charged to the project, such as office space or space rental for public meetings. For office space, under "Rate/Sq. Ft./Yr.," specify the annual charge per square foot; and under "Sq. Ft.," indicate the number of square feet. Under "# Months," enter the number of months space is used. If space is rented for 10 months, the form will calculate the percentage of the year that the space is rented, and calculate the total under "Project Costs." For example, if the annual rate/sq. ft. was \$2.00, the space rented was 100 sq. ft., and occupied for 10 months, the total project cost would equal $(2 \text{ dollars/sq. ft./year} \times 100 \text{ sq. ft.} \times 10 \text{ months}/12 \text{ months (or } 0.833)) = \16.67 .

3g. Other Direct Costs - List separately all other direct costs not already provided for that will be incurred during the project (e.g., telephone, postage, travel stipends for people with disabilities or family members, etc.).

3h. Indirect Costs - Indirect costs are expenses which are incurred by the organization in the conduct of a number of projects and functions. The applicant may charge indirect costs to the project of no more than 10% of the subtotal for personnel, travel, supplies and other direct costs. When calculating the indirect cost base to be charged to Council funds, add the four categories above and multiply by 0.10. Do not include expenses for consultation/subcontracted services or space occupancy. If the applicant has an established indirect cost rate with a federal agency, the applicant may use the portion of that rate which exceeds 10% as a non-federal match. A copy of the established indirect cost rate must be submitted if this category is utilized.